Date: _____

| 110 110 (Rev. 00/12) Buillions in a civil rector | |
|---|---|
| | S DISTRICT COURT |
| | for the |
| Di | strict of |
| Plaintiff(s) V. Defendant(s) |)))) (Civil Action No.))) |
| Desendant(s) | , |
| SUMMONS IN | NA CIVIL ACTION |
| To: (Defendant's name and address) | |
| A lawsuit has been filed against you. | |
| Within 21 days after service of this summons on are the United States or a United States agency, or an office | you (not counting the day you received it) — or 60 days if you cer or employee of the United States described in Fed. R. Civ. aswer to the attached complaint or a motion under Rule 12 of ion must be served on the plaintiff or plaintiff's attorney, |
| If you fail to respond, judgment by default will be You also must file your answer or motion with the court. | e entered against you for the relief demanded in the complaint. |
| | CLERK OF COURT |

Signature of Clerk or Deputy Clerk

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Civil Action No.

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

| | This summons for (nan | ne of individual and title, if any) |) | | |
|---------|--|-------------------------------------|--|----------|--|
| was rec | ceived by me on (date) | | | | |
| | ☐ I personally served the summons on the individual at (place) | | | | |
| | F | | on (date) | ; or | |
| | ☐ I left the summons | at the individual's residen | ce or usual place of abode with (name) | | |
| | , a person of suitable age and discretion who resides there, | | | | |
| | on (date), and mailed a copy to the individual's last known address; or | | | | |
| | ☐ I served the summo | ons on (name of individual) | | , who is | |
| | designated by law to accept service of process on behalf of (name of organization) | | | | |
| | | | on (date) | ; or | |
| | ☐ I returned the sumn | nons unexecuted because | | ; or | |
| | ☐ Other (specify): | | | | |
| | | | | | |
| | My fees are \$ | for travel and \$ | for services, for a total of \$ | | |
| | I declare under penalty of perjury that this information is true. | | | | |
| ъ. | | | | | |
| Date: | | | Server's signature | | |
| | | | Printed name and title | | |
| | | | Server's address | | |

Additional information regarding attempted service, etc: